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SAMFORD RURAL DISTRICT COUNCIL

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the

YEAR 1965



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PUBLIC HEALTH OFFICERS OF THE AUTHORITY

Kathleen M. Harding M.D., D.P.H., A.K.C.	Medical Officer of Health
W. L. Brown M.R.S.H., M.A.P.H.I.	Senior Public Health Inspector
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Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report for 1965.

There is nothing of note in the figures contained therein to which your attention should be drawn, no spectacular outbreak of infectious disease, no alarming increase in any particular cause of death, nor any significant change in any of the statistics. I will, therefore, confine my remarks to more general aspects of public health.

One of the problems of our age is that of Stress. We all suffer from it; some to a greater extent than others; and it is generally believed that our lives to-day are much more exposed to Stress than was the case even fifty or sixty years ago. Life, we are told is so much more complex to-day, there are so many gadgets, so many things to do, but not any more time to fit them in.

Stress affects different people in different ways. In some there is increased worrying, irritability, insomnia, and perhaps loss of appetite. Smokers increase their consumption of cigarettes. In other sufferers actual physical disorders develop. These are known in medical circles as the psychosomatic illnesses. They are real and not imaginary. High blood pressure, asthma, skin disorders, gastric ulcers and coronary thromboses are some of the disorders that may develop in a person who is very prone to stress.

This then is Stress. What can we do about it? In our modern age, we cannot avoid High pressure living. It is something we have to learn to come to terms with. There are various means of doing this. Recreation is an important one. For those whose occupation is a sedentary one it should naturally involve physical activity, perhaps a sport like golf or fishing, or sailing or gardening, but it should be something that requires mental attention as well as physical activity otherwise whilst the hands are occupied the mind will be turning over the business worries from which the person wishes to escape for an hour or two. Sleep, is another of our weapons against Stress, but it is often an elusive weapon and many people have to resort to sleeping pills. This is not a desirable state of affairs. For one thing, modern research has shown that the sleep induced by these sedatives is not like natural sleep, and it is not so beneficial. The best way of getting to sleep is to get physically tired by means of the physical recreation aforesaid. A hot bath is another help in this matter. Some sufferers may need a sedative to start off with, but after a few nights it should be omitted, and placed beside the bed only for use if necessary. A bedtime book, preferably not a thriller, is also useful.

Allied to sleep is rest from work, and in some cases of severe Stress, a few weeks off duty in new surroundings will produce a marked improvement of the condition.

Worry is another part of Stress that has to be overcome. It is a salutary exercise to look back over the year, and to recall some of the situations that caused us severe anxiety. In most cases, on looking back we find that the amount of worrying we did was out of all proportion to the source of our anxiety. We had been making a 'mountain out of a mole-hill'. As Dr. Johnson said, "Cast away all anxiety and keep your mind easy ... With an unquiet mind, neither exercise nor physic can be of much use".

I do not think that this is a state of mind which we can induce in an instant, but we could endeavour to cultivate it gradually and its development within each of us would be one of the most effective methods of keeping Stress at bay.

Before ending this report, I should like to thank the Chairman and Members of the Public Health Committee for their continued support, and all the Officers and Staff of the Council and in particular Mr. Brown and the Public Health Department who have been most helpful and co-operative during the year under review, and I am most grateful to them.

I am,

Yours faithfully,

K. M. Harding

Medical Officer of Health

1. GENERAL STATISTICS

Area	45,029 acres
Estimated Population (Registrar General's figures)	18,730
Inhabited houses	5,442
Rateable Value at 31st March, 1966	£555,479
Sum represented by a penny rate 1966	£2,215

2. VITAL STATISTICS

<u>Live Births</u>	M.	F.	Total
Legitimate	131	131	262
Illegitimate	11	5	16
	142	136	278

Crude Birth Rate per 1,000 population (Samford)	14.85
Comparability factor	1.34
Standardised Birth Rate =	
Crude rate x comparability factor	19.89
Live Birth Rate - England and Wales	18.0

<u>Still Births</u>	M.	F.	Total
Legitimate	1	3	4
Illegitimate	-	-	-
	1	3	4

<u>Still Birth Rate</u> per 1,000 total live and still births	14.19
" " " England and Wales	15.7

Infant Mortality (deaths of infants under 1 year)

	M.	F.	Total
Legitimate	2	3	5
Illegitimate	-	1	1
	2	4	6

Neonatal Deaths (deaths of infants under 4 weeks of age)

	M.	F.	Total
Legitimate	-	2	2
Illegitimate	-	1	1
	-	3	3

2.

ContinuedInfant Mortality Rate

Per thousand live births - Samford	21.59
" " " " - England and Wales	19.0

<u>Deaths</u>	M.	F.	Total
Crude death rate per 1,000 population (Samford)	152	117	269
Comparability factor			14.36
Standard death rate =			0.65
Crude rate x comparability factor			9.34
Death Rate England and Wales			11.5

3.

CAUSES OF DEATH

	M	F	TOTAL 1965	TOTAL 1964
Syphilitic disease	-	1	1	-
Other infective and parasitic disease	1	-	1	-
Malignant neoplasm - Stomach	4	-	4	7
" " - Lung, Bronchus	8	2	10	14
" " - Breast	-	4	4	3
" " - Uterus	-	1	1	3
Other malignant and lymphatic neoplasms	20	15	35	34
Leukaemia, Aleukaemia	-	-	-	2
Diabetes	1	-	1	11
Vascular lesions of nervous system	15	18	33	24
Coronary disease, angina	37	20	57	41
Hypertension with heart disease	2	1	3	4
Other heart disease	12	10	22	29
Other circulatory disease	5	5	10	19
Pneumonia	14	3 13	27	19
Bronchitis	9	3	12	14
Other diseases of respiratory system	1	1	2	3
Ulcer of stomach and duodenum	4	-	4	4
Gastritis, enteritis and diarrhoea	-	1	1	2
Nephritis and nephrosis	1	1	2	2
Hyperplasia of prostate	3	-	3	2
Congenital malformations	2	2	4	2
Other defined and ill-defined diseases	9	15	24	26
Motor vehicle accidents	3	-	3	10
All other accidents	1	3	4	5
Suicide	-	1	1	2
TOTAL	152	117	269	282

COMPARATIVE STATISTICAL TABLE FOR PAST FIVE YEARS

	1961	1962	1963	1964	1965	England and Wales
Estimated Population	17800	18380	18500	18580	18730	-
Total Live Births	238	257	253	274	278	-
Crude Birth Rate	13.37	14.0	13.68	14.75	14.85	-
Standardised Birth Rate	15.78	16.5	17.23	19.76	19.89	18.0
Deaths of Infants under 1 year	7	2	3	8	6	-
Infant Mortality Rate	29.4	7.8	11.86	29.20 10.95	21.59	19.0
Total Deaths	202	185	212	282	269	-
Crude Death Rate	11.35	10.1	11.46	15.18	14.36	-
Standardised Death Rate	10.21	8.6	10.43	11.38	9.34	11.5

MONTHLY NOTIFICATIONS OF NOTIFIABLE DISEASES (EXCLUDING TUBERCULOSIS)

	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	TOTAL
Scarlet Fever	1	11	9	3	-	-	-	-	-	-	2	-	26
Measles	9	37	49	32	16	8	21	4	-	-	-	-	176
Whooping Cough	1	3	3	-	-	-	-	-	-	-	-	-	7
Pneumonia	1	-	3	1	-	-	-	-	-	-	-	1	6
Dysentery	-	-	-	1	-	-	-	-	-	-	-	-	1
Food Poisoning	-	-	-	-	-	-	-	-	4	-	-	-	4
TOTALS	12	51	64	37	16	8	21	4	4	-	2	1	220

5. CONTINUED - NOTIFIABLE DISEASES (EXCLUDING TUBERCULOSIS) - AGE DISTRIBUTION

	0-	1-	2-	3-	4-	5-9	10-14	15-24	25 over	Age Unknown	Total
Scarlet Fever	-	-	1	2	2	12	3	5	-	1	26
Measles	3	12	13	16	19	97	9	4	1	2	176
Whooping Cough	1	-	-	2	-	3	-	1	-	-	7
Pneumonia	-	-	-	-	-	-	-	2	4	-	6
Dysentery	-	-	-	-	-	-	-	-	1	-	1
Food Poisoning	-	-	-	-	-	-	-	-	4	-	4
TOTALS	4	12	14	20	21	112	12	12	10	3	220

NOTIFIABLE DISEASES (EXCLUDING TUBERCULOSIS) TOTALS FOR PAST FIVE YEARS

	1961	1962	1963	1964	1965
Scarlet Fever	4	5	8	6	26
Whooping Cough	10	10	1	6	7
Diphtheria	-	-	-	-	-
Measles	192	27	236	122	176
Pneumonia	2	1	5	15	6
Dysentery	-	5	3	-	-
Acute Poliomyelitis - Non paralytic	-	-	-	-	-
Acute Poliomyelitis - paralytic	-	-	-	-	-
Infective Hepatitis	1	2	-	-	-
Food Poisoning	2	-	2	4	4

TUBERCULOSISNumber of cases on Register at beginning of year

<u>Pulmonary</u>	<u>MALES</u>		<u>Pulmonary</u>	<u>FEMALES</u>		<u>Total</u>
	<u>Non-Pulmonary</u>			<u>Non-Pulmonary</u>		
30	14		18	11		73

During the year one new case was notified (one male pulmonary)

Five cases moved into the District during the year (three male pulmonary and two female pulmonary)

Seven cases recovered during the year (two male pulmonary, 1 male non-pulmonary, two female pulmonary and two female non-pulmonary)

At the end of the year 32 male pulmonary, 13 male non-pulmonary, 18 female pulmonary and 9 female non-pulmonary remained on the register making a total of 72.

Tuberculosis Notifications during past five years

<u>Male</u>	<u>1961</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>	<u>1965</u>
Pulmonary	1	6	1	3	1
Non-Pulmonary	1	-	-	1	-
<u>Female</u>					
Pulmonary	1	2	2	-	-
Non-Pulmonary	1	1	-	1	-

IMMUNISATIONS (Details kindly supplied by the County Medical Officer)

	<u>Primary</u>	<u>Boosters</u>
Diphtheria	5	63
Whooping Cough	-	-
Tetanus	68	58
Diphtheria/Whooping Cough	-	-
Diphtheria/Tetanus	2	32
Diphtheria/Whooping Cough/Tetanus	203	91
Diphtheria/Whooping/Tetanus/Polio-myelitis	5	1

Poliomyelitis

Salk Vaccine	12	12
Sabin Vaccine	225	91

8. VACCINATION AGAINST SMALLPOX

Primary Vaccinations	136
Re-vaccinations	39

9. WATER SUPPLIES AND SEWERAGE

Full details will be found in the report of the Public Health Inspector

10. PREVENTIVE MEASURES AGAINST WELL WATER CYANOSIS

Number of notifications from County Council	- 89
Number receiving mains supply presumed safe	- 83
Sampled and found safe	- 6
Sampled and found unsafe	NIL

11. HOUSING

Details of new houses and bungalows completed during the year will be found in the report of the Public Health Inspector.

12. MILK AND DAIRIES REGULATIONS

Examination of Milk Samples

Statutory - 22 samples taken (including 3 school milk) all results satisfactory.

Chemical Analysis - 11 samples taken (including 3 school milk) all results satisfactory.

Biological - 62 samples taken, all results satisfactory.

Antibiotics - 9 samples taken, all results satisfactory.

13. FACTORIES ACT, 1937-1959

In accordance with Ministry of Health Circular 1/60 the Ministry of Labour Form 572 is set out as follows:-

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
IN RESPECT OF THE YEAR 1965 FOR THE RURAL DISTRICT
OF SAMFORD IN THE COUNTY OF EAST SUFFOLK

Prescribed Particulars on the Administration of the
Factories Act, 1937

PART 1 of the ACT

1. INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors)

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1,2,3,4 & 6 are to be enforced by Local Authorities	3	4	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	36	28	-	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	21	40	-	-
Total	60	72	-	-

FACTORIES ACT, 1937 -1959 (CONTINUED)

2. Cases in which DEFECTS were found

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
(1)	(2)	(3)	(4)	(5)	(6)
Want of cleanliness (S.1.)	1	1	-	-	-
Overcrowding (S.2.)	-	-	-	-	-
Unreasonable Temperatures (S.3.) ...	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floors (S.6.)	-	-	-	-	-
Sanitary Conveniences (S.7.)					
(a) Insufficient	-	-	-	-	-
(b) Unsuitable or defective	1	1	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to outwork)	-	-	-	-	-
Total	2	2	-	-	-

PART VIII OF THE ACT
OUTWORK

(Sections 110 and 111)
Nil